UNIFIED SAN DIEGO COUNTY EMERGENCY SERVICES ORGANIZATION DISASTER SERVICE WORKER REGISTRATION AND LOYALTY OATH

* The completion of the information identified by an asterisk is mandatory in accordance with Govt. Code Sec 8589 and the California Emergency Council Rules and regulations: all other information is voluntary. The purpose of information is registration as a Disaster Service Worker (DSW). Failure to provide mandatory information is disqualification as a DSW.

PLEASE PRINT LEGIBLY IN BLACK/ BLUE INK OR TYPE

* Name: First * Address: Number Street Apt # City State * Telephone No. (NEW APPLICATIO	N	RENEWAL			
*Address: Number Street Apt # City State State	* Name:					
E-Mail Address: * Telephone No. (First	Last				_
E-Mail Address: * Telephone No. (* Address:				~	
* Telephone No. (Number Street		Apt #	City	State	Zip
Class Assigned: Community Emergency Response Team Specialty: City of San Diego CERT Sponsoring Group Name: City of San Diego Fire and Rescue Department *Loyalty Oath of Affirmation (Government Code Sec 3102) I,	E-Mail Address:					
Specialty: City of San Diego CERT Sponsoring Group Name: City of San Diego Fire and Rescue Department * Loyalty Oath of Affirmation (Government Code Sec 3102) 1,	* Telephone No. ()		Date of E	Birth:		
Sponsoring Group Name: City of San Diego Fire and Rescue Department * Loyalty Oath of Affirmation (Government Code Sec 3102) do solemnly swear (or affirm) that I will support and defend Constitution of the United States and the Constitution of the State of California against all enemies, fore and domestic; that I will bear true faith and allegiance to the Constitution of the United States and Constitution of the State of California; that I take this obligation freely; without any mental reservations ourpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter Taken and subscribed before me on, at San Diego, CA (Today's Date: MM/DD/YYYY) * Signature of Volunteer/DSW Signature of Authorized Sponsoring Group Official, To Signature of Director, County OES The Official responsible for the maintenance of this information and the location filed is as follows: Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services 5555 Overland Ave. Bldg 19 San Diego, CA 92123 Responsible Official: Ron Lane, Director Phone Number: 858-565-3490 For Official Use Only:	Class Assigned: Community E	Emergency Resp	oonse Team			
*Loyalty Oath of Affirmation (Government Code Sec 3102) I,	Specialty: City of San Diego C	<u>CERT</u>				
do solemnly swear (or affirm) that I will support and defend Constitution of the United States and the Constitution of the State of California against all enemies, fore and domestic; that I will bear true faith and allegiance to the Constitution of the United States and Constitution of the State of California; that I take this obligation freely; without any mental reservations purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter Taken and subscribed before me on, at San Diego, CA (Today's Date: MM/DD/YYYY) * Signature of Volunteer/DSW Signature of Authorized Sponsoring Group Official, To Signature of Director, County OES The Official responsible for the maintenance of this information and the location filed is as follows: Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services 5555 Overland Ave. Bldg 19 San Diego, CA 92123 Responsible Official: Ron Lane, Director Phone Number: 858-565-3490 For Official Use Only:	Sponsoring Group Name: <u>City</u>	of San Diego Fi	ire and Rescue	<u>Department</u>		
Constitution of the United States and the Constitution of the State of California against all enemies, fore and domestic; that I will bear true faith and allegiance to the Constitution of the United States and Constitution of the State of California; that I take this obligation freely; without any mental reservations purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter Taken and subscribed before me on, at San Diego, CA	* Loyalty Oath of Affirmation (G	overnment Code	Sec 3102)			
Signature of Director, County OES The Official responsible for the maintenance of this information and the location filed is as follows: Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services	Γaken and subscribed before me α	on	, at San Dieg	go, CA		
Signature of Director, County OES The Official responsible for the maintenance of this information and the location filed is as follows: Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services	*	*		,		
The Official responsible for the maintenance of this information and the location filed is as follows: Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services 5555 Overland Ave. Bldg 19 San Diego, CA 92123 Responsible Official: Ron Lane, Director Phone Number: 858-565-3490 For Official Use Only:	Signature of Volunteer/DSW		Signature of Au	thorized Sponsori	ing Group Officia	ıl, Title
Disaster Council: Unified San Diego County Emergency Services Organization Address: Office of Emergency Services 5555 Overland Ave. Bldg 19 San Diego, CA 92123 Responsible Official: Ron Lane, Director Phone Number: 858-565-3490 For Official Use Only:	Signature of Director, County OE	S				
Address: Office of Emergency Services 5555 Overland Ave. Bldg 19 San Diego, CA 92123 Responsible Official: Ron Lane, Director Phone Number: 858-565-3490 For Official Use Only:	The Official responsible for the maint	tenance of this info	ormation and the	location filed is as f	follows:	
For Official Use Only:	Address: Office of Emergency Serv 5555 Overland Ave. Bldg	vices	ency Services Oi	ganization		
	Responsible Official: Ron Lane, Dir	rector Phone Nu	mber: 858-565-	3490		
Registration Date ID #	For Official Use Only:					
	Registration Date	ID # _				
Expiration Date Staff initials/ date	Expiration Date	Staff in	nitials/ date			